



*Consult with CDPH prior to applying if you are unsure if CDPH is the enforcement agency for medical waste in your county.

Check the appropriate box to indicate the type of treatment that will be used at the facility:

- Check the appropriate box below to indicate the status of the facility for which the application is being submitted:

- 4. Facility Site Map:** For *new* permits, provide a map extending for one mile beyond the property boundary, including access roads, residential development, schools, etc. Additionally, provide a drawing of the treatment unit area and outside storage area.

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The fee for a *new* permit can be found at on the CDPH Form 8662.

There is no fee for a revised permit or transfer of ownership.

Mail the application and fee (if applicable) to:

California Department of Public Health
Medical Waste Management Program
MS 7405
P.O. Box 997377
Sacramento, CA 95899-7377

Or UPS, DHL, USPS, FedEx, etc., to:

California Department of Public Health
Medical Waste Management Program
1616 Capitol Ave., 2nd Floor, (MS 7405)
Sacramento, CA 95814

Or Fax to:

(916) 449-5665

For more information visit the Department of Public Health web site at
<http://www.cdph.ca.gov/certlic/medicalwaste>, or phone (916) 449-5671.